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CONFIRMATION NO. 6393

<b>SERIAL NUMBER</b> 10/501,855	<b>FILING OR 371(c) DATE</b> 07/18/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1624	<b>ATTORNEY DOCKET NO.</b> 20712-503 NATL
<b>APPLICANTS</b> Dale Edgar, Wayland, MA; David G. Hangauer, East Amherst, NY; Harry Jefferson Leighton, Rockport, ME;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/01845 01/21/2003 which claims benefit of 60/349,912 01/18/2002 and claims benefit of 60/357,320 02/15/2002 * (*)Data provided by applicant is not consistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 81
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 30623				
<b>TITLE</b> Treatment of sleep disorders using sleep target modulators				
<b>FILING FEE RECEIVED</b> 999	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	